




STATE OF TENNESSEE
DEPARTMENT OF FINANCE AND ADMINISTRATION
DIVISION OF INTELLECTUAL DISABILITIES SERVICES
ANDREW JACKSON BUILDING, 15TH FLOOR
500 DEADERICK STREET
NASHVILLE, TN 37243

MEMORANDUM

MEMO # 0138

DATE: March 9, 2010

TO: C.J. McMorran
John Craven
Kathleen Clinton

FROM: James R. Finch, Ed.D. 
Deputy Commissioner

SUBJECT: TennCare SelectCommunity

The Bureau of TennCare has established a new program called SelectCommunity which will be open to eligible persons with mental retardation who are enrolled in the Home and Community-Based Services (HCBS) waivers operated by the Division of Intellectual Disabilities Services (DIDS) and other Arlington class members who are eligible for TennCare, including those who reside in a private Intermediate Care Facility for the Mentally Retarded. This program is based on enhanced, centralized care management services provided through a nurse care manager.

The nurse care manager will work with the service recipient, the guardian/conservator, the primary care practitioner, the Circle of Support, and others to develop an individualized, Integrated Health Care Plan for each service recipient. The nurse care manager will coordinate the full array of covered physical and behavioral health services that the service recipient needs and will work closely with Independent Support Coordinators and DIDS case managers (as applicable) and providers in implementing the Integrated Health Care Plan which will operate in conjunction with the Individual Support Plan.

SelectCommunity will be implemented in phases. The first phase, offering the SelectCommunity program to Arlington Class Members, will begin on April 1, 2010. Arlington Class Members will receive a letter from TennCare notifying them of the opportunity to opt in to SelectCommunity. This phase is expected to be completed by June 1, 2010. After this phase has been completed, SelectCommunity will be offered to service recipients enrolled in the other HCBS waivers ("Statewide" and "Self-Determination") on a region by region basis until SelectCommunity has been offered to all eligible persons. It is anticipated that it will take approximately 12 to 18 months to expand the program to all eligible persons across the state.

Service recipients who are **currently enrolled** in an HCBS waiver will not be automatically assigned to SelectCommunity but **must opt in** to the program in order to participate (i.e., the service recipient must agree to participate in SelectCommunity). Thus, it is important for Independent Support Coordinators and DIDS case managers to be knowledgeable about SelectCommunity and the process for enrolling in the program. During the months of February and March, each service recipient's ISC or case manager will be required to discuss SelectCommunity enrollment during monthly contacts. During the month of April, the ISC or case manager will be expected to assist the service recipient and/or conservators and surrogate decision makers in making an informed choice and responding to the TennCare notification letter prior to the date indicated on the notice. ISCs and case managers will need to include the following points in discussions about SelectCommunity:

- 1) A notification letter will be sent out from TennCare the first week of April, giving Arlington Class Members the opportunity to participate in SelectCommunity.
- 2) Each person will have to respond (i.e., return the notice to TennCare) within 30 days if they want to choose SelectCommunity as their TennCare Managed Care Organization (MCO). Participation in SelectCommunity is the only MCO option which will provide ongoing nurse care management. .
- 3) Persons who are eligible for Medicare benefits have a Medicare Part D provider for pharmacy benefits. No action is necessary to retain CVS Caremark SilverScripts as their Medicare Part D provider. However, they will be required to pay a premium of \$2.30 per month, as Caremark SilverScripts is considered a premium Part D plan.

Service recipients who do not choose to switch to SelectCommunity will remain enrolled in their current TennCare MCO and will continue to receive all TennCare services, within applicable benefit limits. They will not, however, be eligible for the nurse care management provided by SelectCommunity.

When the transition has been completed, Arlington Class Members will no longer receive any services through CSN, but will receive all of their covered services through TennCare and, as applicable, through Medicare, the HCBS waiver program in which they are enrolled, or as a component of the ICF/MR service which they receive.

After April 1, 2010, all new Arlington Class Members will be automatically assigned to SelectCommunity. If they do not want to participate in the program, they will need to request enrollment in a different TennCare MCO.

For service recipients who have court-appointed conservators or guardians, the notice will be sent to the conservator and the service recipient. ISCs and case managers should discuss transition from CSN to a TennCare MCO with the conservator. For service recipients who do not have a guardian/conservator, the person(s) who usually assists the service recipient with decision-making (including the ISC or case manager or a paid or unpaid advocate) can assist in choosing a TennCare MCO.

Attached is a document titled "Frequently Asked Questions" which will assist in answering questions that may present during discussions with service recipients and conservators/surrogate decision makers. If you have any questions, please contact Stacey Dixon at 901-745-7585 or e-mail your questions to VSHP.SelectCommunity@tn.gov.

Please distribute this memo to your case management staff and to Independent Support Coordinators and other waiver service providers.

JRF:wlm

Attachment

cc: Laura Doutre, Director of Person Centered Practices
Richard Strecker, Director of Operations
Joanna Damons, Assistant Commissioner of Policy, Planning, and Consumer Services

QUESTIONS AND ANSWERS

1. Why can't the Community Service Network (CSN) keep providing my health care?

Answer: CSN will not be able to pay for any services you get after May 31, 2010. The state will offer a new TennCare plan that will make nurse care management available to all eligible people who are enrolled in DIDS Home and Community Based Services waivers.

2. Who will provide my health care when CSN is gone?

Answer:

- a. If you have Medicare, you will continue getting care from Medicare. If you also have TennCare, you will get some of your care from TennCare.
- b. If you have TennCare but not Medicare, you will continue getting care from TennCare.

You can choose to stay with your current TennCare MCO. You can also choose another TennCare MCO. You may decide that you want to choose SelectCommunity.

3. What is SelectCommunity?

Answer: It is a program developed by TennCare. Each person in the program has a nurse care manager. The nurse care manager helps you manage all your health care.

4. Why would I want to choose SelectCommunity?

Answer: You get nurse care management from CSN now. You can get this from SelectCommunity as well.

5. What is Nurse Care Management?

Answer: This means that a registered nurse will help ensure that you get the services that you need. The nurse will work with your physician, Circle of Support, and others. The nurse will prepare a plan of care for you. It will include all your TennCare services. This plan will be coordinated with the waiver services that you also get.

6. How is SelectCommunity different from other TennCare MCOs?

Answer: SelectCommunity is the only MCO that will provide ongoing nurse care management to all members. Otherwise, the services covered by SelectCommunity are the same as the services covered by other MCOs.

7. If I want to choose SelectCommunity, when will it start?

Answer: In April, you will get a letter. You can tell TennCare that you want to change to SelectCommunity by responding to the letter. If you change to SelectCommunity, June 1, 2010 is the start date for the program.

8. What will happen if I do not respond to the letter from TennCare?

Answer: On June 1, 2010, your current MCO will begin providing all of your health care services. You will not have a SelectCommunity nurse care manager to help you manage your health care.

9. What will happen if I choose another MCO instead of SelectCommunity?

Answer: On June 1, 2010, the MCO you choose will begin providing all of your health care services. You will not have a SelectCommunity nurse care manager to help you manage your health care.

10. I may want to keep my current TennCare MCO or choose an MCO other than SelectCommunity. If so, will I be able to change to SelectCommunity later?

Answer: Yes. To do this, call the number listed below and ask to change.

TennCare Solutions 1-800-878-3192

11. Will I be able to keep my current physician?

Answer: If you have Medicare, you can keep your current physician. If you do not have Medicare, you will be able to keep your current TennCare physician if you do not change to a different TennCare MCO. You may want to choose SelectCommunity. If so, your physician can tell you if he/she works with SelectCommunity.

12. Will I be able to get the prescription drugs that I have been getting?

Answer:

- a. If you have Medicare, your Medicare Part D plan will continue to pay for your drugs. You can stay with your current Medicare Part D plan (CVS Caremark SilverScripts). You will have to pay a monthly premium of \$2.30 per month. You may want to choose another Medicare Part D plan that does not charge a premium. Your ISC or case manager can help with this.

For any Medicare Part D plan you choose, there may be co-payments for medications. The co-payments will be no more than \$3.50 for each generic medicine and no more than \$6.30 for other medicines. If you get SSI, you may not have to pay co-payments.

- b. If you do not have Medicare, your TennCare MCO will pay for your drugs. You will be able to get drugs when there is a medical need. Some drugs that were covered by CSN may not be covered by your MCO. Your physician may have to get prior approval for some drugs. In some cases your physician may need to give you a similar drug that is covered by the MCO.

13. Will I be able to get drugs that do not require a prescription? Who will pay for my drugs that do not require a prescription?

Answer: These are not usually paid for by Medicare or TennCare. You will be responsible for the cost of these drugs. This would include drugs such as laxatives or Tylenol.

14. What if I want to change Medicare Part D plans so I don't have to pay a premium?

Answer: Your ISC or case manager can help with this. Your current Medicare Part D provider covers the drugs you need. Your ISC or case manager can use the Medicare website to see which other Part D plans cover the drugs you need. You **do not** need to fill out the enrollment forms on the Medicare website. If you fill out the online forms, you **cannot** ask for your plan change to happen on June 1, 2010, which is when CSN will stop paying for your drugs. If you decide to change plans, your ISC or case manager can help you call the plan and request enrollment effective on June 1, 2010.

15. Will SelectCommunity pay for all the services I get now?

Answer: SelectCommunity will pay for most of the services you get now. If you get music and art therapy, SelectCommunity will not pay for it.